

Education Learning Trust

The Kingsway School

Medical Conditions and First Aid Policy

Date Updated:	Summer 2026
Ratified by Governors:	Summer 2026
Next review:	Summer 2027

Revision History

Date	Document Version	Document Revision History	Policy Owner / Reviser	Document Approver
Summer 2026	1.0	The Kingsway School incorporating Benedict's Law		

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1 **Policy Statement**

- 1.1 At The Kingsway School , we are an inclusive community that welcomes and supports students with medical conditions.
- 1.2 We provide an environment to enable students with all medical conditions the same opportunities to participate as others at school as far as is reasonably practicable.
- 1.3 In order to achieve this we:
 - Ensure all staff understand the impact medical conditions can have on students and their duty of care to students and young people.
 - To provide staff training on the common medical conditions that affect students at this school.
 - Ensure all staff feel confident in knowing what to do in an emergency via relevant training.
 - Understand that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
 - Understand the importance of medication being taken as prescribed by healthcare professionals.
 - Ensure that all staff receive additional training about any students they may be working with who have complex health needs supported by an Individual Health Plan (IHP). This includes other staff not directly in contact with a student to ensure continuity of care in the absence of staff.

2 **Scope**

This policy covers four elements of medical needs:

- Emergency first aid response = immediate first aid for injuries/acute incidents
- Planned provision for medical needs = long-term systems, IHPs, storage, communication, inclusion, record keeping
- Unplanned provision for medical needs = urgent intervention linked to known medical conditions (asthma attacks, seizures, allergic reactions, diabetic incidents etc.)
- Illness during the school day = students becoming generally unwell during the day

3 **Emergency First Aid Response**

First aid is the immediate care given to a student, member of staff, or visitor who is injured or becomes unwell while at school. First aid is intended to provide temporary support until recovery, collection by a parent/carers, or further medical treatment is obtained.

First aid may include:

- cleaning and dressing minor wounds
- applying ice packs
- monitoring symptoms
- responding to emergencies within the scope of staff training

First aiders provide immediate care within the scope of their training and are not expected to diagnose medical conditions or provide ongoing medical treatment.

The school ensures that appropriately trained first aid staff are available during the school day who understand and are trained in emergency procedures. Emergency equipment, including a defibrillator, is accessible and first aid incidents are recorded appropriately.

In an emergency:

Identified available staff will act in accordance with their training, the student's Individual Healthcare Plan (IHP) where applicable, and guidance from emergency services. Staff are expected to act in loco parentis and in accordance with their duty of care contacting emergency services where necessary and in consultation with the school senior leaders.

If a student requires hospital treatment, parents/carers will be informed as soon as possible and a member of staff will accompany the student and remain with them until a parent/carer arrives.

The school senior leaders review medical emergencies and incidents to identify any lessons learned or additional control measures required as soon as possible following emergencies.

4 Planned Provision for Medical Needs

The school recognises that some students have ongoing or long-term medical conditions requiring planned support during the school day.

These may include:

- asthma
- diabetes
- epilepsy
- allergies and anaphylaxis
- mental health needs
- other chronic or complex conditions

The school is committed to creating an inclusive environment for students with medical conditions enabling students to participate fully in school life wherever practicable and making reasonable adjustments where required. The school believes in promoting independence in managing medical needs where appropriate.

Individual Healthcare Plans (IHPs)

Where appropriate, students with medical conditions will have an Individual Healthcare Plan (IHP) which include details of the condition, symptoms and triggers, medication requirements, emergency procedures, staff responsibilities and healthcare professional advice.

IHPs are:

- developed in partnership with parents/carers and relevant professionals
- reviewed regularly and updated following changes in medical need
- shared with relevant staff on a need-to-know basis
- securely stored in accordance with confidentiality requirements

Parents/carers are responsible for:

- providing accurate and up-to-date medical information
- informing the school of changes to medication or treatment
- ensuring medication supplied to school is in date and clearly labelled

Medical Conditions Information Pathway

Form sent out by school asking parents/carers to identify any medical conditions including: • Transition discussions • At start of school year • New enrolment (during the school year) • Parents/carers inform school of any new diagnosis, school then to inform relevant medical professional	School
↓	
School and relevant medical professional collate response and identify those needing individual health plans	School
↓	
Relevant medical professional contacts parents/carers to formulate new plan or review existing plan if necessary	Relevant medical Professional
↓	
Relevant medical professional discusses new or reviewed IHP with the designated person in school. School staff training needs are identified at this point. IHP stored in school according to policy.	Relevant medical professional & School

	
All parties to ensure IHP is in place and healthcare professionals have commissioned/delivered any relevant training. If there are any difficulties in getting this finalised, the School Nurse to discuss with designated person	Relevant medical professional & School
	
All parties to ensure annual IHP review	Relevant medical professional & School

Students with medical conditions requiring Individual Health Care Plans are: those who have diabetes, epilepsy with rescue medication, anaphylaxis, gastrostomy feeds, central line or any other long term venous access, tracheostomy, severe asthma that has required an overnight hospital admission within the last 12 months. There may be other students with unusual chronic conditions who need a care plan. Please liaise with the School Nurse about them.

Please note that students with asthma no longer require an IHP but may have an asthma management plan from their doctor or specialist health care professional. This is a useful guide for parents on how to manage a student's asthma and be useful to settings in some circumstances. For students having an asthma attack, school should follow the 'Asthma Emergency Procedures'

Medication Administration

The school maintains procedures for the safe administration of medication. Medication will only be administered with written parental consent and strictly in accordance with prescribed instructions by appropriately informed or trained staff. The school will make all reasonable efforts to administer medication at the required time during the school day.

According to the DfE Guidance on Administering Medication in Schools, school staff may be asked to provide medication to students 'although they cannot be required to do so'. Designated and specifically trained staff take on the voluntary role of administering prescribed medication, but only with the written consent of the student's parent/carer. Parents will need to complete a Parental Agreement for The School/Setting to Administer Medicine Form at the school office at the beginning of the day. Emergency medication must be readily accessible at all times and some students may carry and self-administer medication where this has been agreed by the school and documented within an IHP.

Where required, as part of an IHP, the school also follows procedures relating to emergency medication and non-prescription medication. The school ensures the safe storage of medication and disposal of medication and sharps. Medication record keeping is kept up-to-date.

5 Unplanned Provision for Medical Needs

The school recognises that students with known medical conditions may require urgent or unplanned intervention during the school day, even where planned support arrangements are in place.

The school ensures that:

- relevant staff are aware of students with medical conditions in their care
- staff have access to emergency procedures and IHPs
- designated staff receive condition-specific training in addition to general first aid training
- emergency medication is readily available

Staff understand that some medical conditions may become serious or life-threatening if not managed promptly. Where a student experiences a medical difficulty relating to a known condition, staff may:

- administer emergency medication in accordance with training and consent arrangements
- assist students with medication
- monitor symptoms
- contact parents/carers
- seek advice from NHS services
- contact emergency services where necessary

The school maintains specific arrangements for responding to asthma attacks, allergic reactions/anaphylaxis, seizures, diabetic emergencies, mental health crises where immediate support is required.

Allergy management (see separate policy) arrangements include:

- staff allergy awareness training
- emergency response procedures
- access to spare adrenaline auto-injectors where permitted
- measures to reduce allergen exposure risks

Where staff identify concerns that a student's medical condition may not be well controlled, this will be recorded and discussed with parents/carers. The school recognises that medical needs may change over time and will review support arrangements where necessary.

6 Illness During the School Day

Students who become unwell during the school day will be assessed by an appropriate member of staff. Depending on the nature of the illness or symptoms, the school may

provide basic first aid and monitor the student. A decision should be taken whether to contact parents/carers and arrange collection from school. Parents/carers will normally be contacted:

- following a head injury
- where symptoms worsen
- where further medical assessment may be required
- where a student is unable to remain in school safely or comfortably

The school does not routinely take temperatures as part of illness assessment but staff will respond appropriately to symptoms indicating possible fever or infection. Where appropriate and with parental consent, the school may administer approved medication in accordance with school procedures. All significant illness, injury and medication administration will be recorded in accordance with school procedures. Students who are temporarily unwell may receive reasonable short-term adjustments during the school day, including: supervised rest modified participation in activities temporary withdrawal from physical activity where appropriate

The school will work with parents/carers to support students returning following illness, injury or hospital admission, including through phased returns or temporary adjustments where appropriate. The Medical Officer/Safeguarding Team will write a risk assessment and will always follow medical guidance sought from a healthcare professional.

Administering Paracetamol

The member of staff responsible for giving medicines must be wary of routinely giving paracetamol to students. If a student complains of pain as soon as they arrive at school and asks for painkillers, it is not advisable to give paracetamol until the amount given over the past 24 hours has been established as the student may have been given a dose of paracetamol before coming to school.

Many non-prescription remedies such as Beecham's Powders, Lemsip, Night Nurse etc. contain paracetamol. If paracetamol tablets are taken soon after taking these remedies, it could cause an unintended overdose. Staff must gain parental consent to give paracetamol, and the parental consent form must be completed to ensure allergies and last dosage are logged. Paracetamol must be administered according to the instructions on the box or label. Parents are required to confirm the dosage that they wish to be administered to their child up to the limit specified for their age on the manufacturer's instructions. Stronger doses or combination drugs, which contain other drugs besides paracetamol must not be administered. It is recommended that the school keep its own stock of paracetamol and antihistamine. School paracetamol/antihistamine must be stored securely in a lockable First Aid cupboard in an area not accessible to students.

7 Training and Communication

The school ensures that:

- Staff receive appropriate medical awareness updates
- Designated staff receive condition-specific training where required
- Relevant staff are informed of students' medical needs and emergency procedures

- The policy is communicated to staff, parents/carers, governors and relevant healthcare professionals where appropriate

8 **Educational Visits and Risk Assessments**

The school carries out risk assessments for educational/offsite visits ensuring that medication and IHPs accompany students on visits with appropriately trained staff in accompaniment. Risk assessments are put in place when a student returns to school following significant illness or hospital admission. The school should ensure that it receives relevant medical information before visits take place

9 **Safe Storage – Emergency Medication**

The Kingsway School has clear guidance on the storage of medication at school. Emergency medication is readily available to students who require it at all times during the school day. If the emergency medication is a controlled drug and needs to be locked up, it is kept in the first aid room where the keys are only available to the appropriate staff. It is essential that any medication is safely and securely handed to a member of the school staff. Medications brought into school without the school's awareness would constitute a safeguarding concern.

Emergency medication for asthma is readily available in reception depending upon the individual school, in a clearly identifiable box. Spare inhalers for trips may also be kept in the locked cupboard in the school office/first aid room.

Emergency medication and IHPs are taken with the student to off-site activities. If the student concerned is involved in extended school services, then specific arrangements and risk assessments should be agreed with the parent/carer and appropriate staff involved. Where medication needs to be stored in the fridge, medicine must be clearly labelled with the student's name and form and kept in a location that is not accessible to students, e.g. staff room.

Safe Storage – Non-Emergency Medication

All non-emergency medication is kept in a dedicated cupboard or fridge in a staff access only room e.g. the staff room or first aid room. Students with medical conditions know where their medication is stored and how to access it.

Staff ensure that prescribed medication is accessible only to those for whom it is prescribed.

Safe Storage – General

This school has identified members of staff who ensure the correct storage of medication at school. All controlled drugs are kept in a locked cupboard and only named staff will have access to these.

All medication stored at school is reviewed at the end of the school year – any expired (or due to expire) medicines disposed of/sent home as arranged with parents. It is the parent's responsibility to ensure adequate and in-date supplies of all required medicines which should be sent into school promptly with appropriate instructions.

The identified member of staff, along with the parents/carers of students with medical conditions, ensures that all emergency and non-emergency medication brought into school is clearly labelled with the student's name, the name of the medication, route of administration, dose and frequency, an expiry date of the medication.

All medication is supplied and stored in its original containers. All medication is labelled with the student's name, the name of the medication, expiry date and the prescriber's instructions for administration, including dose and frequency.

Medication is stored in accordance with the manufacturer's instructions, paying particular note to temperature. If appropriate medication is stored in a dedicated fridge.

Some medication for students at our school may need to be refrigerated. All refrigerated medication is clearly labelled. Refrigerators used for the storage of medication are inaccessible to unsupervised students or lockable as appropriate.

All medication (including blue inhalers) and equipment such as spacers or blood sugar monitoring kits are sent home as requested by parents / carers or if out of date / at the end of the school year.

It is the parent's/carer's responsibility to ensure adequate supplies of new and in date medication comes into school at the start of each term with the appropriate instructions and ensures that the school receives this.

10 **Safe Disposal**

Parents/carers at this school are asked to collect out-of-date medication. Schools may choose to speak to parents/carers about collecting out of date medication or at the request of parents/carers, may take it to the pharmacy for safe disposal.

If parents/carers do not pick up out-of-date medication, or at the end of the school year, medication is taken to a local pharmacy for safe disposal.

The named member of staff is responsible for checking the dates of medication and arranging for the disposal of any that have expired.

Sharps boxes are used for the disposal of needles. Parents/carers obtain sharps boxes from the student's GP or paediatrician on prescription. All sharps boxes in this school are stored safely and securely and in a convenient location.

If a sharps box is needed on an off-site or residential visit, a named member of staff is responsible for its safe storage and return to a local pharmacy, to school or to the student's parent/carer.

Disposal of sharps boxes - the sharps bin should be closed securely and returned to parents/carers who then need to take the sharps bin to the GP for disposal.

Hazardous waste is disposed of in a dedicated hazardous waste bin and collected and disposed of by an external contractor.

11 Roles and Responsibilities in the School Community

Each member of the school and health community knows their roles and responsibilities in maintaining an effective First Aid and Medical Conditions policy.

We work in partnership with all stakeholders including the school's governing body, school staff, and community healthcare professionals and any relevant emergency practitioners to ensure the policy is planned, implemented and maintained successfully.

The following roles and responsibilities are used for the medical conditions policy at this school. These roles are understood and communicated regularly.

Governor Responsibility

The Governors have responsibility to:

- ensure the health and safety of their staff and anyone else on the premises or taking part in school activities (this includes all students). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips.
- ensure the schools health and safety policies and risk assessments are inclusive of the needs of students with medical conditions and reviewed annually
- make sure the medical conditions policy is effectively implemented, monitored and evaluated and regularly updated
- ensure that the school has robust systems for dealing with medical emergencies and critical incidents (see Critical Incidents Guidelines), at any time when students are on site or on out of school activities

Headteacher Responsibility

The Headteacher has a responsibility to:

- ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks
- ensure the policy is put into action, with good communication of the policy to all staff, parents/carers and governors
- ensure every aspect of the policy is maintained
- ensure that if the oversight of the policy is delegated to another senior member of staff that the reporting process forms part of SLT meetings
- monitor and review the policy at regular intervals, with input from governors, parents/carers, staff and external stakeholders
- ensure that an evaluation of the policy takes place with governors about implementation of the Medical Conditions and First Aid Policy
- ensure through consultation with the governors that the policy is adopted and put into action
- ensure adequate numbers of staff are trained first aiders with up-to-date certification

All School Staff and Support Staff Responsibility

Staff have a responsibility to:

- be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency
- call an ambulance in an emergency and liaise with emergency services
- understand the school's First Aid and Medical Conditions Policy
- know which students in their care have a complex health need and be familiar with the content of the student's Individual Health Plan
- know the school's registered first aiders and where assistance can be sought in the event of a medical emergency
- know the members of the schools Senior Incident Management Team, as identified in the Critical Incident Policy, if there is a need to seek assistance in the event of an emergency
- maintain effective communication with parents/carers including informing them if their child has been unwell at school
- ensure students who need medication have it when they go on a school visit or out of the classroom
- be aware of the social integration of students with medical conditions and promote positive interactions
- understand the common medical conditions and the impact these can have on students
- ensure that all students with medical conditions are not excluded unnecessarily from activities they wish to take part in
- ensure that students have the appropriate medication or food during any exercise and are allowed to take it when needed
- follow universal hygiene procedures if handling body fluids
- ensure that students who present as unwell should be questioned about the nature of their illness, if anything in their medical history has contributed to their current feeling of being unwell, if they have felt unwell at any other point in the day, if they have an Individual Health Plan and if they have any medication. The member of staff must remember that while they can involve the student in discussions regarding their condition, they are *in loco parentis* and as such must be assured or seek further advice from a registered first aider if they are in doubt as to the child's health, rather than take the child's word that they feel better.
- ensure that parents/carers are contacted by telephone, as well as by accident form if their child has sustained any head injury or bump to the head. A text message can be sent when school has been unable to contact parents/carers by phone.
- ensure that parents/carers are contacted by telephone (or text – see above), prior to their child being collected from school, when there is a clearly visible mark

Teaching Staff Responsibility

- They have an additional responsibility to also:
- be aware that medical conditions can affect a student's learning and provide extra help when students need it, in liaison with the SENCO and other relevant staff.
- liaise with parents/carers and welfare officers if a child is falling behind with their work because of their condition

- use opportunities such as PPE and Personal Development opportunities and other areas of the curriculum to raise awareness of medical conditions

Healthcare Professional Responsibility

They have a responsibility to:

- help provide regular updates for school staff in managing the most common medical conditions at school at the school's request
- provide information about where the school can access other specialist training
- update the Individual Health Plans in liaison with appropriate school staff and parents/carers
- deliver training as requested by the school where appropriate First Aiders' Responsibility
- They have an additional responsibility to:
 - give immediate, appropriate help to casualties with injuries or illnesses
 - when necessary, ensure that an ambulance is called
 - ensure they are trained in their role as first aider

SENCO

They have the additional responsibility to:

- ensure the necessary arrangements are made to keep students with medical conditions safe in school
- ensure that students with medical conditions are able to appropriately access learning, with any barriers to learning minimised as far as possible
- ensure all students with medical conditions are not excluded unnecessarily from activities they wish to take part in by making reasonable adjustments
- ensure teachers make the necessary arrangements if a student needs special consideration or access arrangements in tests, exams or coursework

Students' Responsibility

- Students have a responsibility to:
 - treat other students with and without a medical condition equally
 - tell their parents/carers, teacher or nearest staff member when they are not feeling well
 - let a member of staff know if another student is feeling unwell
 - treat all medication with respect
 - know how to gain access to their medication in an emergency
 - ensure a member of staff is called in an emergency situation

Parent / Carer's Responsibility

They have a responsibility to:

- tell the school if their child has a medical condition or complex health need
- ensure the school has a complete and up-to-date Individual Health Plan if their child has a complex health need

- inform the school about the medication their child requires during school hours
- inform the school/provider of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities
- tell the school about any changes to their child's medication, what they take, when, and how much
- inform the school of any changes to their child's condition
- ensure their child's medication and medical devices are labelled with their child's full name
- ensure that the school has full emergency contact details for them
- provide the school with appropriate spare medication labelled with their child's name
- ensure that their child's medication is within expiry dates
- keep their child at home if they are not well enough to attend school
- if there is an outbreak or specific risk of an outbreak, as communicated by the school or other healthcare professional/organisation, then parent/carer must follow the guidance issued by the school/relevant professional bodies e.g. DfE or Public Health England
- ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional
- if the child has complex health needs, ensure information from medical professionals is communicated to the school
- have completed/signed all relevant documentation including medical form and the Individual Health Plan if appropriate
- support the school in adhering to the plan
- support the school by engaging with any necessary Medical Action Plan/liaison with the School Nurse and other agencies if medical conditions/illness is causing attendance concerns
- ensure communication
- understand staff are not medical practitioners and not make unreasonable requests
- attend at the school when requested

12 School Structure for the leadership and implementation of Medical Conditions and First Aid

Medical Conditions		
	Aspect	Role/ Name
Strategic Leadership	Overall oversight and compliance with HSE and DfE regulations and expectations for medical conditions including policy review and oversight.	Headteacher
Strategic Leadership	Ensuring all relevant documentations are in place for	Deputy Headteacher

	the safe management of medical conditions (risk assessment/ HCPs). Maintaining the school's register of medical conditions and regular review and updates.	
Operational	Coordinate training and HCP reviews including liaison with external agencies.	Medical Officer
Operational	Implement aspects as identified on HCPs and risk assessments.	Medical Officer
First Aid		
	Aspect	Role/ Name
Strategic Leadership	Overall oversight and compliance with HSE and DFE regulations and expectations for managing first aid in school, including policy review and oversight.	Headteacher
Strategic Leadership	Critical incident and strategic deployment plan where first aid incidents arise. Including post learnings and safeguarding implications.	Deputy Headteacher
Operational	Training oversight for staff, stock management and timetabling and deployment of first aiders on call.	Medical Needs Officer
Operational	Implementing first aid when required.	Support Staff

13 Legislation and Guidance

Trusts are responsible for the health and safety of students in their care. Areas of legislation that directly affect a medical conditions policy are described in more detail in *Managing Medicines in Schools and Early Years Settings* (2005) and *Supporting Students at School with Medical Conditions* (2015). The main pieces of legislation are the Equality Act (2010) and the Children & Families Act (2014). These acts make it unlawful for service providers, including schools, to discriminate against disabled people. Other relevant legislation includes the Education Act 1996, the Care Standards Act 2000, the Health and

Safety at Work Act etc. 1974, the Management of Health and Safety at Work Regulations 1999 and the Medicines Act 1968.

This section outlines the main points from the relevant legislation and guidance that schools should consider when writing a medical conditions and first aid policy.

The following policies need to be considered:-

Department for Education and Department of Health Special Educational Needs and Disability Code of Practice 0-25 years.

Health and Safety Policy

Critical Incidents Guidance

Visits and Journeys Guidelines

Records Management & Retention Policy

Reporting of Injuries, Diseases & Dangerous Occurrences Regulations. (R.I.D.D.O.R)

This form can be downloaded at:

<http://intranet/smbcintr/new/content/directorates/bs/hr/shrfirst/documents/RIDDOR.pdf>

Supporting Students at School with Medical Conditions (2015)

This provides guidance for schools and academies from the DfE on how to support children with medical conditions so they have full access to education, including school trips and physical education.

Equality Act (2010) (EA) and The Children and Families Act 2014 (CFA).

Many students with medical conditions are protected by the EA and CFA, even if they don't think of themselves as 'disabled'.

The Equality and Human Rights Commission (EHRC) (previously the Disability Rights Commission) publishes a code of practice for schools, which sets out the duties under the EA and gives practical guidance on reasonable adjustments and accessibility. The EHRC offers information about who is protected by the EA, schools' responsibilities and other specific issues.

School Responsibilities Include:

Not to treat any student less favourably in any school activities without material and sustainable justification.

To make reasonable adjustments that cover all activities – this must take into consideration factors such as financial constraints, health and safety requirements and the interests of other students. Examples of reasonable adjustments can be found in the Department for Education & Department of Health Special Educational Needs and Disability Code of Practice 2015 and is dealt with here on page 19. *

To eliminate discrimination and promote equality of opportunity in accordance with the provisions of Section 149 of the Equality Act 2010, which came into force on 5 April 2011 relating to the public sector equality duty.

To promote disability equality in line with the guidance provided by the DfE and EHRC through the Disability Equality Scheme. *DfES publications are available through the DfE.

The Education Act 1996

Section 312 of the Education Act covers children with special educational needs, the provisions that need to be made and the requirements local health services need to make to help a local authority carry out its duties.

The Care Standards Act 2000

This act covers residential special schools and responsibilities for schools in handling medicines.

Health and Safety at Work Act etc. 1974

This act places duties on employers for the health safety and welfare of their employees and anyone not in their employment who may be affected by the activity. This covers the head teacher and teachers, non-teaching staff, students, visitors and contractors.

Management of Health and Safety at Work Regulations 1999

These regulations require employers to carry out risk assessments, manage the risks identified and to communicate these risks and measures taken to employees.

Medicines Act 1968

This act specifies the way that medicines are prescribed, supplied and administered.

Benedict's Law

Benedict's Law is a UK campaign and emerging statutory framework aimed at improving allergy safety in schools through mandatory policies, staff training, emergency medication access, and individual healthcare planning.

14 Additional Guidance

Other guidance resources that link to a medical conditions policy include:

- Department for Education & Department of Health Special Educational Needs and Disability Code of Practice 2015
- Equality Act 2010: Advice for Schools
- Reasonable Adjustments for disabled students (2012)
- Supporting students at school with medical conditions (2014)
- The Mental Capacity Act Code of Practice: Protecting the vulnerable (2005)
- Every Child Matters: Change for Children (2004). The 2006 Education Act ensures that all schools adhere to the five aims of the Every Child Matters agenda
- National Service Framework for Children and Young People and Maternity Services (2004) – provides standards for healthcare professionals working with children and young people including school health teams
- Health and Safety of Students on Educational Visits: A Good Practice Guide (2001) – provides guidance to schools when planning educational and residential visits
- Misuse of Drugs Act 1971 – legislation on the storage and administration of controlled medication and drugs
- Home to School Travel for Students Requiring Special Arrangements (2004) – provides guidance on the safety for students when travelling on local authority provided transport
- Including Me: Managing Complex Medical Needs in School and Early Years Settings (2005)

Medical Conditions at School Website: <http://medicalconditionsatschool.org.uk/>

Managing Medicines and Providing Medical Support in Schools and Early Years Settings
UNISON - <https://www.cheshireeastunison.org.uk/files/209-1.pdf>

Further Advice and Resources

The Anaphylaxis Campaign

PO Box 275
Farnborough
Hampshire
GU14 6SX
Phone 01252 546100
info@anaphylaxis.org.uk
www.anaphylaxis.org.uk

Asthma UK

Summit House
70 Wilson Street
London
EC2A 2DB
Phone 020 7786
info@asthma.org.uk
www.asthma.org.uk

Diabetes UK

Macleod House
10 Parkway
London
NW1 7AA
Phone 020 7424 1000
info@diabetes.org.uk
www.diabetes.org.uk

Epilepsy Action

New Anstey House
Gate Way Drive
Yeadon
Leeds
LS19 7XY
Phone 0113 210 8800
epilepsy@epilepsy.org.uk
www.epilepsy.org.uk

Long-Term Conditions Alliance

202 Hatton Square
16 Baldwins Gardens

London
EC1N 7RJ
Phone 020 7813 3637
info@ltca.org.uk

Department for Education

Sanctuary Buildings
Great Smith Street
London
SW1P 3BT
Phone 0870 000 2288
Textphone/Minicom 01928 794274
<https://www.gov.uk/government/organisations/department-for-education>

Council for Disabled Children

National Children's Bureau
8 Wakley Street
London
EC1V 7QE
Phone 020 7843 1900
enquiries@ncb.org.uk
<https://councilfordisabledchildren.org.uk/>

National Children's Bureau

8 Wakley Street
London
EC1V 7QE
Phone 020 7843 6000
www.ncb.org.uk

Health Protection Team Stockport

Public Health
Upper Ground Floor
Stopford House
Stockport
SK13XE
Phone 0161 474 2440
Healthprotection@stockport.gov.uk

Public Health England

Health Protection Team
0344 225 0562
<https://www.gov.uk/government/organisations/public-health-england>